

Committee for Political Action (PAC) Registration Form

978

FILE

FEB 22 2006

State of Nevada
SECRETARY OF STATE
HELLER

Print or type the following information; complete both sides of this registration form:

REGISTRATION: (check one) ☐ New registration ☒ Amended registration (if amended, list reason)

REASON FOR AMENDMENT: ☒ Change in officers ☒ Change resident agent
☐ Other _____

NAME OF COMMITTEE:

Silver State Leadership Fund

Mailing Address:

6502 S. McCarran Blvd., Suite D

Reno, NV 89509 (775) 823-3777
City State Zip Telephone

PURPOSE: (Briefly state the purpose for which the political action committee was organized.)

RESIDENT AGENT: (Pursuant to NRS 294A.240, each committee for political action must appoint and keep in this state a resident agent who must be a natural person who resides in the State of Nevada.)

Name of Resident Agent: David W. Turner

Mailing Address:

6502 S. McCarran Blvd., Suite D

Reno, NV 89509 (775) 823-3777
City State Zip Telephone

ACCEPTANCE OF APPOINTMENT BY RESIDENT AGENT

I, David W. Turner, hereby accept appointment as Resident Agent for the
above named committee for political action.



Signature of Resident Agent

02/16/06

Date

OFFICERS:

(Please list the name, title, address and telephone number of each officer.)

James A. Gibbons
Name
Chairman

Title	Telephone Number
David W. Turner	

Name _____
Treasurer _____

Title	Telephone Number
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2535 Kinney Lane

Address
Reno, NV 89511

City/State/Zip
6502 S. McCarran Blvd., Ste. D

Address
Reno, NV 89509

City/State/Zip

Robert Uithoven
Name

Vice Chairman	
Title	Telephone Number

2070 Honey Ridge Drive

Address _____

Reno, NV 89511

City/State/Zip _____

Name _____

Address _____

Title	Telephone Number
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City/State/Zip

Name _____

Address

[illegible]

City/State/Zip _____

AFFILIATIONS: (If the committee for political action is affiliated with any other organizations, list the name, address and telephone number of each organization.)

Name of Organization:

Address:**Telephone No.:**

Submitted By:

David W. Turner
Name of representative of group

February 16, 2006
Date

**Send Completed Form to:
SECRETARY OF STATE
101 NORTH CARSON STREET #3
CARSON CITY, NEVADA 89701-4786**

PHONE: (775) 684-5705 FAX: (775) 684-5718